PATENT APPLICATION FEE DETERMINATION RECORD

Effective	October	1.	2000

Effective October 1, 2000

Application or Docket Number

1921-01308

CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL ENTITY TYPE (O D	OTHER THAN SMALL ENTITY			
TOTAL CLAIMS		2		(Ooldmir 2)		r	RATE	FEE	OR I	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		ŀ	BASIC FEE	355.00	OR	BASIC FEE	· 710.00
TOTAL CHARGEABLE CLAIMS			2 minus 20=		. 7		Ì	X\$ 9=	······································	OR	X\$18=	9
INDEPENDENT CLAIMS				nus 3 = * 😜			ŀ	X40=		OR	X80=	ð
MULTIPLE DEPENDENT CLAIM PRESENT						f	+135=		OR	+270=	0	
* If the difference in column 1 is less than zero, enter "0" in				r "0" in c	olumn 2	L	TOTAL		OR	TOTAL	710	
CLAIMS AS AMENDED - PART II											OTHER	
		(Column 1)		(Colui		(Column 3)		SMALL E	ENTITY	OR	SMALL	
AMENDMENT A	. Zaka	CLAIMS REMAINING AFTER AMENDMENT	A Common	HIGH NUM PREVIO PAID	IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	T CL AIM	=		X40=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270=		
							_ _	TOTAL ADDIT. FEE		OR	TOTAL ADDIT, FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)	,				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI		PRESENT EXTRA		RATE	ADDI- TIONAL FEE	(k)	RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		12		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=		X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	JETIPLE DEF	ENDEN	CLAIM		'	+135=	:	OR	+270=	
			•				L	TOTAL DDIT. FEE		OR	TOTAL ADDIT, FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)	_					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		PREVI	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total		Minus	**				X\$ 9=		OR	X\$18=	
	Independent	AUTATION OF M	Minus	***	- OL - U	<u> </u>		X40=		OR	X80=	* .
	FIRST PHESE	NTATION OF MI	JUIPLE DEF	ENDEN	I CLAIM		!	+135=	· · · · · ·	OR	+270=	`
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."							TOTAL			TOTAL	
***	If the "Highest Nu	mber Previously Pa mber Previously Pa ber Previously Pai	aid For" IN THI	S SPACE	is less tha	ın 3, enter "3."	^	DDIT. FEE	ropriot he	ľ	ADDIT. FEE	
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